Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| (Column 1) (Column 2)  |  |                   |                                |            |       |  |                  |         | SMALL ENTITY TYPE |                        | OR      | OTHER THAN OR SMALL ENTITY |                        |
|--|--|-------------------|--------------------------------|------------|-------|--|------------------|---------|-------------------|------------------------|---------|----------------------------|------------------------|
| FOR  |  |                   | NUMBER FILED                   |            |       | NUMBER EXTRA                               |                  |         | RATE              | FEE                    | 1       | RATE                       | FEE                    |
| BASIC FEE  |  |                   |                                |            |       |  |                  |         |                   | 345.00                 | OR      |                            | 690.00                 |
| TOTAL CLAIMS   |  |                   | // minus 20= *                 |            |       | *  |                  | `   ;   | X\$ 9=            |                        | OR      | X\$18=                     |                        |
| INDEPENDENT CLAIMS   |  |                   | /                              | / minus    | 3 =   | *  | 1                |         | X39=              |                        | OR      | X78=                       | 78                     |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |                   |                                |            |       |  | +                | -130=   |                   | OR                     | +260=   | Hel                        |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |                   |                                |            |       |  | T                | OTAL    |                   | OR                     | TOTAL   | 1028                       |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |                   |                                |            |       |  |                  | s       | SMALL ENTITY      |                        |         | OTHER<br>SMALL             |                        |
| AMENDMENT A  | 99 6 48<br>44 7 7 10<br>44 7 7 10              | REMA<br>AF        | AIMS<br>AINING<br>TER<br>DMENT |            | PI    | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | f       | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | ٠ _               | /<br>- A-                      | Minus      | **    | ·  | =/               | >       | <b>(\$ 9=</b>     |                        | OR      | X\$18=                     |                        |
| AME  | Independent FIRST PRESEI                       | * >               | N OE MI                        | Minus      | PENI  |  | 2000             | ;       | <b>X</b> 39=      |                        | OR      | X78=                       |                        |
|  | · ·  | NIAHO             | N OF MIC                       | JLIIPLE DE | PEINL | JENT CLAIM                                 |                  | +       | 130=              |                        | OR      | +260=                      |                        |
|  | •  |                   |                                | 1 = *      |       |  |                  | 40      | TOTAL<br>DIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |
|  |  | (Colu             | ımn 1)                         |            | ((    | Column 2)                                  | (Column 3)       | ADI     | JII. FEE          |                        |         | ADDII.   C.E.              |                        |
| AMENDMENT B  |  | CL/<br>REM/<br>AF | AIMS<br>AINING<br>TER<br>DMENT |            |       | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | F       | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total 😓  | *                 |                                | Minus      | **    |  | =                | )       | <b>(</b> \$ 9=    |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | •                 | <u></u>                        | Minus      | **    |  | =                | ;       | <b>K</b> 39=      |                        | OR      | X78=                       |                        |
|  | FIRST PRESE                                    | NTATIO            | N OF M                         | ULTIPLE DE | PEN   | DENT CLAIM                                 |                  |         | 130=              |                        | OR      | +260=                      | <b>13</b> %            |
|  |  |                   |                                |            |       |  |                  | Ľ       | TOTAL             |                        | `       | TOTAL                      |                        |
|  |  |                   | •                              |            |       |  |                  | ADI     | OIT. FEE          |                        | OR      | ADDIT. FEE                 |                        |
|  |  |                   | imn 1)<br>AIMS                 |            | ्।    | Column 2)<br>HIGHEST                       | (Column 3)       |         |                   |                        |         |                            |                        |
| AMENDMENT C  |  | REM/<br>AF        | AINING<br>TER<br>DMENT         |            | Р     | NUMBER<br>REVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | F       | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                 |                                | Minus      | **    |  | =                | \[      | (\$ 9=            |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | *                 |                                | Minus      | **    | *  | =                |         | (39=              | - <del></del>          | OR      | X78=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                   |                                |            |       |  |                  |         |                   |                        | UH      |                            |                        |
| 1. If the control is control to be a then the control in column O write #OP in column O  |  |                   |                                |            |       |  |                  |         | 130=              |                        | OR      | +260=                      |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE |  |                   |                                |            |       |  |                  |         |                   |                        |         |                            |                        |
|  | The "Highest Num                               |                   |                                |            |       |  |                  | r found | in the ap         | propriate box          | k in co | lumn 1.                    |                        |